

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 81

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Sharon Oyster

Mailing Address PO Box 189

City

Franklinton

State

NC

Zip Code

27525-0189

FEC ID number of contributing
federal political committee.

C

Name of Employer

self-employed

Occupation

homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 10285432

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr Rebecca Susan King

Mailing Address 5505 Six Forks

City

Raleigh

State

NC

Zip Code

27609-3809

FEC ID number of contributing
federal political committee.

C

Name of Employer

self-employed

Occupation

dentist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 10285433

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Roy Piscitello

Mailing Address 1435 Poinsett Drive

City

Chapel Hill

State

NC

Zip Code

27517-9233

FEC ID number of contributing
federal political committee.

C

Name of Employer

self-employed

Occupation

restaurant owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 10285434

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00